



Suicide Awareness and Prevention

Online Refresher Training for Suicide Awareness



Objectives

- Gain insight into Warning signs & Risk Factors for suicide
- Gain insight into Protective Factors that decrease the risk for suicide.



Suicide Awareness

Suicide is a preventable personnel loss that impacts unit readiness, morale and mission effectiveness. Relationship disruption, substance abuse, financial problems, legal problems, and mental health problems (such as depression) can interfere with individual efficiency and unit effectiveness and also increase a person's suicide risk. Factors including positive attitude, solid spirituality, good problem solving skills, and healthy stress control can increase individual efficiency and unit effectiveness and reduce risk of intentional self harm. As such, preventing suicide in the Navy begins with promotion of health and wellness consistent with keeping service members and civilian employees ready to accomplish the mission.



Why Awareness is Important

Navy suicide prevention programs consist of four elements:

1. Training - increasing awareness of suicide concerns, improving wellness and ensuring personnel know how to intervene when someone needs help.
2. Intervention - ensuring timely access to needed services and having a plan of action for crisis response.
3. Response - assisting families, units, service members and civilians affected by suicide behaviors.
4. Reporting - reporting incidents of suicide and suicide-related behaviors

Reference: OPNAVINST 1720.4A



What to Watch for...

- “Suicide happens when pain exceeds resources for coping with pain.”





What to Watch for...

- A suicidal person may exhibit behaviors that are clues to his/her state of mind. These clues are warning signs. The acronym "IS PATH WARM" will help you remember the warning signs that indicate a person is reacting to stress and may be considering suicide:
 - Ideation: S/he expresses thoughts of suicide verbally or written, as outright threats or hints.
 - Substance abuse: S/He increases or has excessive alcohol or drug use.
 - Purposelessness: S/He sees no reason for living or has no sense of meaning or purpose in life.
 - Anxiety: S/He feels anxious, agitated, unable to sleep, or sleeps excessively.



What to Watch for...

- Trapped: S/He feels like there is no way out.
- Hopelessness: S/He feels hopeless about self, others, and/or the future.
- Withdrawal: S/He withdraws from family, friends, usual activities, and/or society.
- Anger: S/He feels rage or uncontrolled anger, and seeks revenge for perceived wrongs.
- Recklessness: S/He acts without regard for consequences, with excessively risky behavior, and/or seemingly without thinking.
- Mood Changes: S/He experiences dramatic changes in mood.
- These behaviors should alert you to get involved with this person immediately!



Seven Ways to Contribute to Prevention

1. "You make a difference!" Let three people in your life know they make a difference to you. Be specific about how and why you appreciate who they are. Ask that they pass it on to three people.
2. Run a "fire" drill. Consider what you would do in a personal crisis within yourself or someone else. Run a drill to practice your plan.
3. Do a self-assessment. Take a few minutes to see where you are. If you can recognize a concern early, there are many resources to address it before it starts to impact your work performance, relationships and health.
4. Connect with the community. Don't go it alone. There are many community and national organizations community that can give you ideas and links to local, state and youth-specific activities, such as the American Association of Suicidology www.suicidology.org



Seven Ways to Contribute to Prevention (cont)

5. Engage in fellowship, meditation, or prayer. Work with your local chaplain, faith group or friends to hold a breakfast or lunch in which suicide warning signs, risks and protective factors are discussed. Set aside time for prayer on behalf of those struggling in the darkness of a personal crisis.
6. Good grief. The pain caused by a loss does not heal quickly or easily. If you are grieving a loss or putting off coming to terms with it, make some time to sort things out and facilitate healing.
7. Share your story. People find hope and strength through adversity and reach out to help one another. Please share what helped you by emailing your story to suicideprevention@navy.mil.



Actions and Accountabilities

- As Leaders and Supervisors, we are responsible for :
 - expanding education and awareness
 - observation and oversight
 - proactive engagement
- ACT !!!
 - Ask - Don't be afraid to ask the person what is bothering them and persist to overcome any reluctance to talk about it. Don't judge.
 - Care - Listen without judging. Let them know they are not alone. Offer hope.
 - Treat - Take action, get assistance and follow up. Take the individual to a person or agency specializing in crisis intervention and suicide prevention. Do not leave them alone until help is available.



Common Misconceptions

- Myth
 - People who talk about suicide are just trying to get attention.
- Fact
 - People who die by suicide usually talk about it first. They are in pain and oftentimes reach out for help because they do not know what to do and have lost hope.



Common Misconceptions

- Myth
 - Suicide always occurs without any warning signs.
- Fact
 - There are almost always warning signs.



Common Misconceptions

- Myth
 - “If a person is determined to kill him/herself, nothing is going to stop him/her.”
- Fact
 - Even the most severely depressed person has mixed feelings about death, and most waver until the very last moment between wanting to live and wanting to die.



Common Misconceptions

- Myth
 - “Talking about suicide may give someone the idea.”
- Fact
 - You don't give a suicidal person morbid ideas by talking about suicide.



Suicide Facts

- There are an estimated 8 to 25 attempted suicides to 1 completion.
- Suicide is the 11th leading cause of death in the U.S. (homicide is 15th). (CDC)
- Suicide is the 3rd leading cause of death for 15- to 24-year-old Americans. (CDC)
- An average of one person dies by suicide every 16.2 minutes. (CDC, AAS)



Suicide Facts

- There are four male suicides for every female suicide. (CDC, AAS)
- Most suicides are completed with a firearm.
- It is estimated that there are at least 4.5 million survivors in this country. (AAS)



Military Suicide Facts

- Historically, suicide is the second leading cause of death in the military.
- In 2008 there were 128 suicides by serving Army & 41 by serving Marines
- The Army suicide rate is now higher than the general American population
- The last time it exceeded the civilian rate was in the late 1960's-at the highpoint of the war in Vietnam



Military Suicide Facts

- In 2008, there were 41 suicides by serving Navy.
- In 2009, there have been 35 confirmed suicides for Navy.
- The Dept. of Veteran Affairs recorded 144 suicide cases in 2008.



Warning Signs

- Ideation
- Substance use
- Purposelessness
- Anger
- Trapped
- Hopelessness
- Withdrawal
- Anxiety
- Recklessness
- Mood Disturbances



Protective Factors

- Attitudes, values, & norms prohibiting suicide.
- Good health & access to mental/physical health care.
- Strong connections to friends, family, & supportive significant others.
- Cultural, religious or spiritual beliefs that discourage suicide.
- A healthy fear of risky behaviors & pain.
- Hope for the future; optimism.
- Impulse control
- Strong sense of self-worth or self-esteem
- Sense of personal control or determination
- Access to a variety of clinical interventions and support for help seeking
- Coping skills
- Resiliency



External/Environmental Protective Factors

- Strong relationships, particularly with family members
- Opportunities to participate in and contribute to Unit Community projects/activities.
- Responsibilities/duties to others
- Social acceptance
- Unit Cohesion



How to Help

- Ask
 - Listen attentively to everything that the person has to say.
- Care
 - Comfort the person with words of encouragement.
- Treat
 - If the person is at a high risk of suicide, do not leave him or her alone.



Four Important Questions

- Suicidal?
- Method?
- Have what you need?
- When?



Responding to Threats or Statements

- Stay calm.
- Send someone for help.
- Do not leave alone.
- Buy time.



Training and Education

- Suicide Prevention training is available through local Fleet and Family Support Centers, chaplains and medical treatment facilities. Sailors and families can get free counseling at Fleet/ Family Support Centers.
- NKO course on Suicide Prevention at www.nko.navy.mil. Select Personal Development tab at top. In left hand column, select link to GMT (General Military Training). Scroll down courses in center of page to CPPD-GMT09-024 - Introduction to the Stress Response Continuum and Suicide Awareness
- Video by former Detroit Lions quarterback Eric Hipple
<http://www.trooptube.tv/videos/2919>
- Video - Life Counts <http://www.trooptube.tv/videos/2697>
- Navy Suicide Awareness <http://www.suicide.navy.mil>
- Marine Corps Suicide Prevention Program
<http://www.usmc-mccs.org/suicideprevent/>
- DOD Military Health System Newsletter issue dedicated to Navy Suicide Prevention Program. <http://www.health.mil/Pages/Page.aspx?ID=69>



Training and Education (cont)

- Directory of Suicide Prevention and related web sites on U.S. Navy Suicide Prevention Training Home Page https://www.qmo.amedd.army.mil/depress/SUD/web_directory.pdf
- DON Suicide Prevention Training Course for Navy and Marine Corps community, <http://www.nmcphc.med.navy.mil/downloads/suicide/manual.pdf>
- Navy Education and Training Command 14-minute video, "Suicide Prevention: Making the Critical Decision," copy available at <http://dodimagery.afis.osd.mil>
- American Foundation for Suicide Prevention http://www.spanusa.org/index.cfm?fuseaction=home.viewPage&page_id=B5D8B8F4-0956-BAA5-EB4E215D7A32EEBC
- American Association of Suicidology <http://suicidology.org/web/guest/how-can-you-help>
- Federal Occupational Health, Critical Incident Stress Management <http://www.foh.dhhs.gov/Public/CISM/CISMInfo.asp>
- Military Mental Health Screening Program <http://www.militarymentalhealth.org/Welcome.aspx>



Resources

- Mental Health Unit, Naval Hospital Corpus Christi—(361) 961-3620
- Command Chaplain—(361) 961-3751
- Fleet and Family Support Center: (361) 961-2372
- MILITARY ONESOURCE (24/7) @ 1-800-342-9647
- Additional resources
 - National Suicide Prevention Lifeline 1-800-273-Talk (1-800-273-8255)
 - National Hopeline Network 1-800-Suicide (1-800-784-2433)
www.hopeline.com
 - Suicide TTY (Text) Telephone: 1-800-799-4TTY (1-800-799-4889)



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